Low birth babies being under-nourished are susceptible to under nutrition, infection, diseases and higher mortality. The_C£i»tributory-factoFs are-maternal health and nutritional status, inter pregnancy intervals, age of mother and illiteracy.

(c) Government of India has been implementing various health and nutritional programmes to improve the nutritional status of vulnerable population i.e. children, pregnant and lactating mothers. Prevention of nutritional anemia forms an intergral part of the Reproductive and Child Health Programme of Department of Family Welfare. The other important programmes are:

(i) Availability of essential food items at subsidized cost through Public Distribution System;

(ii) Improving the purchasing power of the people through income generating schemes;

(iii) Nutrition Education to increase the awareness and bringing about the desired changes in the feeding practices including promotion of breast feeding:

(iv) Supplementary Feeding Programmes.

Rising Population in Uttar Pradesh

5092. SHRI SATISH CHANDRA SITARAM PRADHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether in order to check rising population, the Uttar Pradesh Government propose to announce New Population Policy in the State in the next three to four months;

(b) whether the new policy propose to envisage denial of Assembly and Parliamentary election tickets to persons not following the norm of small family;

(c) whether the Union Government propose to ask other States and Union territories to follow suit of Uttar Pradesh; and

(d) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) Yes, Sir.

(b) No, Sir.

(c) No, Sir.

(d) The Central Bill, on following the two-child norm, for contesting assembly and parliamentary elections viz. the Constitution (Seventy-Ninth Amendment) Bill, 1992 is pending before the Rajya Sabha since December, 1992. The discussions are continuing to arrive at a consensus among political parties, for passage of the Bill. When the amendment corresponding to the Bill comes into force, it will replace similar laws in States/UTs.

Criteria for opening CGHS Dispensaries

5093. PROF. M.M. AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the policy and criteria followed by Government for providing CGHS dispensaries/units of Indian System of Medicine and Homoeopathy in Delhi and outside Delhi;

(b) whether any survey has been undertaken for opening of CGHS dispensaries of Allopathic System of Medicine and CGHS Units of ISM&H, where many Central Government employees are residing;

(c) whether any request has been received by Government in this regard so far; if so, the system-wise, location- wise and year-wise details, so far; and

(d) the action taken by Government in this regard so far?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) No norms/criteria for opening of ISM&H dispensaries/units have been specified. However, opening of ISM&H dispensaries/units is considered on demand from the beneficiaries subject to sufficient justification and availability of resources.

(b) Opening of a new dispensary under CGHS either for allopathic or for ISM&H is considered on the specific requests of the Residential Welfare Associations and no survey is undertaken for this purpose. However, a survey was conducted for Alipur Block as per directions of the Government.

(c) and (d) The information is available in the attached statement.